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Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/527,649-Conf. # 2238	
INF	ORMATION	I DI	SCLOSURE	Filing Date	October 20, 2005	
ST.	STATEMENT BY APPLICANT			First Named Inventor	Gordan Calundann	
(Use as many sheets as necessary)				Art Unit	1746 1797	
			s necessary)	Examiner Name	Unknown Anthony Shumate	
Sheet	1	of	1	Attorney Docket Number	15588-00011-US	

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Examir Initials*	ner"	Cite No.1	Document Number Number-Kind Code ² (if factors)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	/Anthony Shumate/	Date Considered	09/03/2009

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Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

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